

Nomination for City Council District A Vacancy

Are you the Nominee?* Please select Yes or No	
○ Yes ○ No	
Personal Information	
First Name	
	— ₇
Last Name*	
Phone Number*	
Email Address*	
Nominee Information	
First Name*	
Last Name*	
	_]
Address1*]



Address2				
City				
State				
Zip				
L.				
Phone Number*				
Email Address*				
Email Address				
Subdivision				
Are a United States Citizen?*	Are you a	registered voter?*		
O You O No	O Voc	○ No		
○ Yes ○ No	O Yes	ONO		
Have you been a resident of the State of Texas for a minimum of one year?*	Have you been a Missouri City resident since May 1, 2018?*			
rexas for a fillillification of one year:				
○ Yes ○ No	O Yes	O No		
Are you 18 or older?*	Do you ha	ve any felony convi	ctions?*	
O Yes O No	O Yes	○ No		



O Yes	No	at least two	counch Meet	ngs every monti	1;	
Please list	your previous an	d/or current C	ommunity In	volvement or Ac	tivities*	
						li
Share your	r interest in servi	ng.*				
						li
Have you	submitted your res	sume?				
O Yes	O _{No}					
	ch the resume of the s a required field	e nominee.				